

² The Board notes that appellant submitted additional evidence on appeal and to OWCP after the May 23, 2016 decision was issued. The Board's jurisdiction is limited to reviewing the evidence that was before OWCP at the time of its final decision. Therefore, the Board lacks jurisdiction to review this additional evidence. 20 C.F.R. § 501.2(c)(1).

On appeal appellant contends that she is still experiencing limitations, has a pain score of 6 out of 10, which increases to 10 intermittently, and needs continued support to help access medical appointments. She further contends that supporting documentation, including doctor's reports, were not submitted fully or on time on her behalf.

FACTUAL HISTORY

On March 29, 2016 appellant, a 52-year-old nursing assistant, filed a traumatic injury claim (Form CA-1), alleging that she sustained an injury to her left arm on March 22, 2016 as a result of demonstrating use of new slings for patient use. She stated that she was demonstrating with another nursing assistant when she gripped a patient transfer sheet to pull the patient up and strained her arm. Appellant did not stop work. The employing establishment controverted the claim as appellant had not established fact of injury.

In a March 23, 2016 report, Dr. Rudolf Iskandar, a Board-certified physiatrist, diagnosed left shoulder strain, left elbow strain, left wrist strain, left hand and finger strain, neck strain, and mononeuritis of left upper extremity. In a work status report dated March 23, 2016, he released appellant to modified duty that day. On March 29, 2016 Dr. Iskandar asserted that appellant was injured at work on March 22, 2016 while lifting and using a patient repositioning system which aggravated left arm pain symptoms. Appellant complained of pain in the left arm, left hand, left wrist, and left elbow areas with numbness and tingling sensations mostly in the left hand and some pain radiating up to the neck, left shoulder, and left trapezius muscle areas. Dr. Iskandar noted that appellant had a past work injury on December 16, 2014 when a patient grabbed her left wrist and twisted her left arm while trying to pull away, straining her neck, left shoulder, upper arm, left elbow, left forearm, and left wrist areas. In a March 29, 2016 work status report, he released appellant to modified duty that day.

Appellant submitted physical therapy reports dated March 30, 2016 in support of her claim.

In an April 21, 2016 letter, OWCP advised appellant of the deficiencies of her claim and afforded her 30 days to submit additional evidence and respond to its inquiries.

In response, appellant submitted a work status report dated April 8, 2016 from Dr. Iskandar who released her to modified duty that day. She further submitted a prescription from Dr. Iskandar also dated April 8, 2016.

By decision dated May 23, 2016, OWCP accepted the incident, but denied the claim as the medical evidence was insufficient to establish a causal relationship between appellant's diagnosed conditions and the accepted March 22, 2016 employment incident.

LEGAL PRECEDENT

An employee seeking benefits under FECA has the burden of proof in establishing the essential elements of his or her claim, including the fact that the individual is an "employee of the United States" within the meaning of FECA, that the claim was timely filed within the

applicable time limitation period of FECA, that an injury³ was sustained in the performance of duty, as alleged, and that any disability or medical condition for which compensation is claimed is causally related to the employment injury.⁴

To determine whether a federal employee has sustained a traumatic injury in the performance of duty, it must first be determined whether a “fact of injury” has been established. A fact of injury determination is based on two elements. First, the employee must submit sufficient evidence to establish that she actually experienced the employment incident at the time, place, and in the manner alleged. Second, the employee must submit sufficient evidence, generally only in the form of medical evidence, to establish that the employment incident caused a personal injury. An employee may establish that the employment incident occurred as alleged, but fail to show that his or her condition relates to the employment incident.⁵

Causal relationship is a medical issue and the medical evidence generally required to establish causal relationship is rationalized medical opinion evidence. The opinion of the physician must be based on a complete factual and medical background of the employee, must be one of reasonable medical certainty, and must be supported by medical rationale explaining the nature of the relationship between the diagnosed condition and the specific employment factors identified by the employee.⁶

ANALYSIS

OWCP has accepted that the employment incident of March 22, 2016 occurred at the time, place, and in the manner alleged. The issue is whether appellant’s left upper extremity conditions resulted from the March 22, 2016 employment incident. The Board finds that appellant failed to meet her burden of proof to establish a causal relationship between the conditions for which compensation is claimed and the accepted employment incident.

In his reports, Dr. Iskandar diagnosed left shoulder strain, left elbow strain, left wrist strain, left hand and finger strain, neck strain, and mononeuritis of left upper extremity. In a March 29, 2016 report, he asserted that appellant was injured at work on March 22, 2016 while lifting and using a patient repositioning system which aggravated her left arm pain symptoms. Dr. Iskandar noted that appellant had a past work injury on December 16, 2014 when a patient grabbed her left wrist and twisted her left arm while trying to pull away, straining her neck, left shoulder, upper arm, left elbow, left forearm, and left wrist areas. The Board finds that Dr. Iskandar failed to provide sufficient medical rationale as to how lifting a patient while demonstrating new slings at work on March 22, 2016 caused appellant’s left upper extremity

³ OWCP regulations define a traumatic injury as a condition of the body caused by a specific event or incident, or series of events or incidents, within a single workday or shift. Such condition must be caused by external force, including stress or strain, which is identifiable as to time and place of occurrence and member or function of the body affected. 20 C.F.R. § 10.5(ee).

⁴ See *T.H.*, 59 ECAB 388 (2008).

⁵ *Id.*

⁶ *Id.*

conditions. Dr. Iskandar noted that appellant's conditions occurred while she was at work, but such generalized statements do not establish causal relationship. They merely repeat appellant's allegations and are unsupported by adequate medical rationale explaining how her physical activity at work actually caused or aggravated the diagnosed conditions.⁷ The need for rationale is particularly important as the evidence of record indicates that appellant had a preexisting left upper extremity condition. Dr. Iskandar's opinion was based, in part, on temporal correlation. However, the Board has held that neither the mere fact that a disease or condition manifests itself during a period of employment nor the belief that the disease or condition was caused or aggravated by employment factors or incidents is sufficient to establish a causal relationship.⁸ Dr. Iskander did not otherwise sufficiently explain how the diagnostic testing and examination findings led him to conclude that the March 22, 2016 incident at work caused or contributed to the diagnosed conditions. Thus, the Board finds that the reports from Dr. Iskandar are insufficient to establish that appellant sustained an employment-related injury on March 22, 2016.

Appellant submitted physical therapy reports dated March 30, 2016 in support of her claim. These documents do not constitute competent medical evidence because a physical therapist is not a "physician" as defined under FECA.⁹ As such, this evidence is also insufficient to meet appellant's burden of proof.

On appeal appellant contends that she is still experiencing limitations, has a pain score of 6 out of 10, which increases to 10 intermittently, and needs continued support to help access medical appointments. Appellant further contends that supporting documentation, including doctor's reports, were not submitted fully or on time on her behalf. As noted above, appellant bears the burden of proof to establish an employment-related injury and that, even if she may have established that the employment incident occurred, as alleged, the facts fail to show that her condition relates to the employment incident.¹⁰ The Board finds that OWCP properly reviewed all of the medical evidence of record. As appellant has not submitted any rationalized medical evidence to support her claim that she sustained an injury causally related to the March 22, 2016 work incident, she has failed to meet her burden of proof to establish a claim for compensation.

Appellant may submit new evidence or argument with a written request for reconsideration to OWCP within one year of this merit decision, pursuant to 5 U.S.C. § 8128(a) and 20 C.F.R. §§ 10.605 through 10.607.

⁷ See *K.W.*, Docket No. 10-98 (issued September 10, 2010).

⁸ See *E.J.*, Docket No. 09-1481 (issued February 19, 2010).

⁹ 5 U.S.C. § 8101(2); *Jennifer L. Sharp*, 48 ECAB 209 (1996) (physical therapists). See also *Gloria J. McPherson*, 51 ECAB 441 (2000); *Charley V.B. Harley*, 2 ECAB 208, 211 (1949) (a medical issue such as causal relationship can only be resolved through the submission of probative medical evidence from a physician).

¹⁰ See *supra* notes 3-5.

CONCLUSION

The Board finds that appellant has not met her burden of proof to establish that her left upper extremity conditions are causally related to a March 22, 2016 employment incident.

ORDER

IT IS HEREBY ORDERED THAT the May 23, 2016 decision of the Office of Workers' Compensation Programs is affirmed.

Issued: March 14, 2017
Washington, DC

Colleen Duffy Kiko, Judge
Employees' Compensation Appeals Board

Alec J. Koromilas, Alternate Judge
Employees' Compensation Appeals Board

Valerie D. Evans-Harrell, Alternate Judge
Employees' Compensation Appeals Board